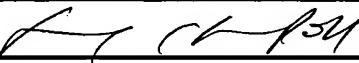


SFU

<b>O I P E</b> <b>TRANSMITTAL</b> <b>FORM</b> <b>FEB 08 2006</b> <small>(This form is to be used for all correspondence after initial filing)</small>		Application Number 10/770,723
Total Number of Pages in This Submission 14	Filing Date February 2, 2004	
	First Named Inventor TANAKA, Katsuya	
	Art Unit 2186	
	Examiner Name Hetul B. Patel	
	Attorney Docket Number 16869N-104900US	

<b>ENCLOSURES (Check all that apply)</b>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

#### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Chun-Pok Leung		
Date	February 6, 2006	Reg. No.	41,405

#### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Joy Salvador
Date	February 6, 2006

FEB 08 2006

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEETRANSMITTAL  
For FY 2006**

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 200.00)

<i>Complete if Known</i>	
Application Number	10/770,723
Filing Date	February 2, 2004
First Named Inventor	TANAKA, Katsuya
Examiner Name	Hetul B. Patel
Art Unit	2186
Attorney Docket No.	16869N-104900US

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  
 under 37 CFR 1.16 and 1.17

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  
 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  
 Multiple dependent claims

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
				<b>Small Entity</b>	<b>Fee (\$)</b>
14	-20 or HP = 0	x \$50	\$0		

HP = highest number of total claims paid for, if greater than 20

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
				<b>Small Entity</b>	<b>Fee (\$)</b>
7	-3 or HP = 1	x \$200	\$200		

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

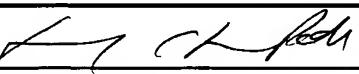
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____	- 100 = _____	/ 50 = _____ (round up to a whole number)	x _____	= _____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: \_\_\_\_\_

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 41,405	Telephone 650-326-2400
Name (Print/Type)	Chun-Pok Leung		Date February 6, 2006



**PATENT**  
Attorney Docket No.: 16869N-104900US  
Client Ref. No.: NT1432US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Katsuya TANAKA *et al.*

Application No.: 10/770,723

Filed: February 2, 2004

For: STORAGE DEVICE AND  
CONTROLLING METHOD  
THEREOF

Customer No.: 20350

Confirmation No.: 2283

Examiner: Hetul B. Patel

Technology Center/Art Unit: 2186

**AMENDMENT**

**Mail Stop Amendment**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed November 23, 2005, please enter the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.

02/09/2006 RFEKADU1 00000001 201430 10770723

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